

Putting it Together: Financing Comprehensive Services in Child Care and Early Education



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Overview

- Discuss the value of reaching children in child care settings with comprehensive services.
- Learn about the potential uses of a variety of federal funding streams in child care settings.
- Explore state and local examples of partnerships.
- Address key considerations for implementation.

Why Comprehensive Services?

- Programs showing lasting benefits of high quality early education focused on whole child and included comprehensive services.
- Increased attention to school readiness, child outcomes, return on investment.
- Increased poverty has increased need for comprehensive services.



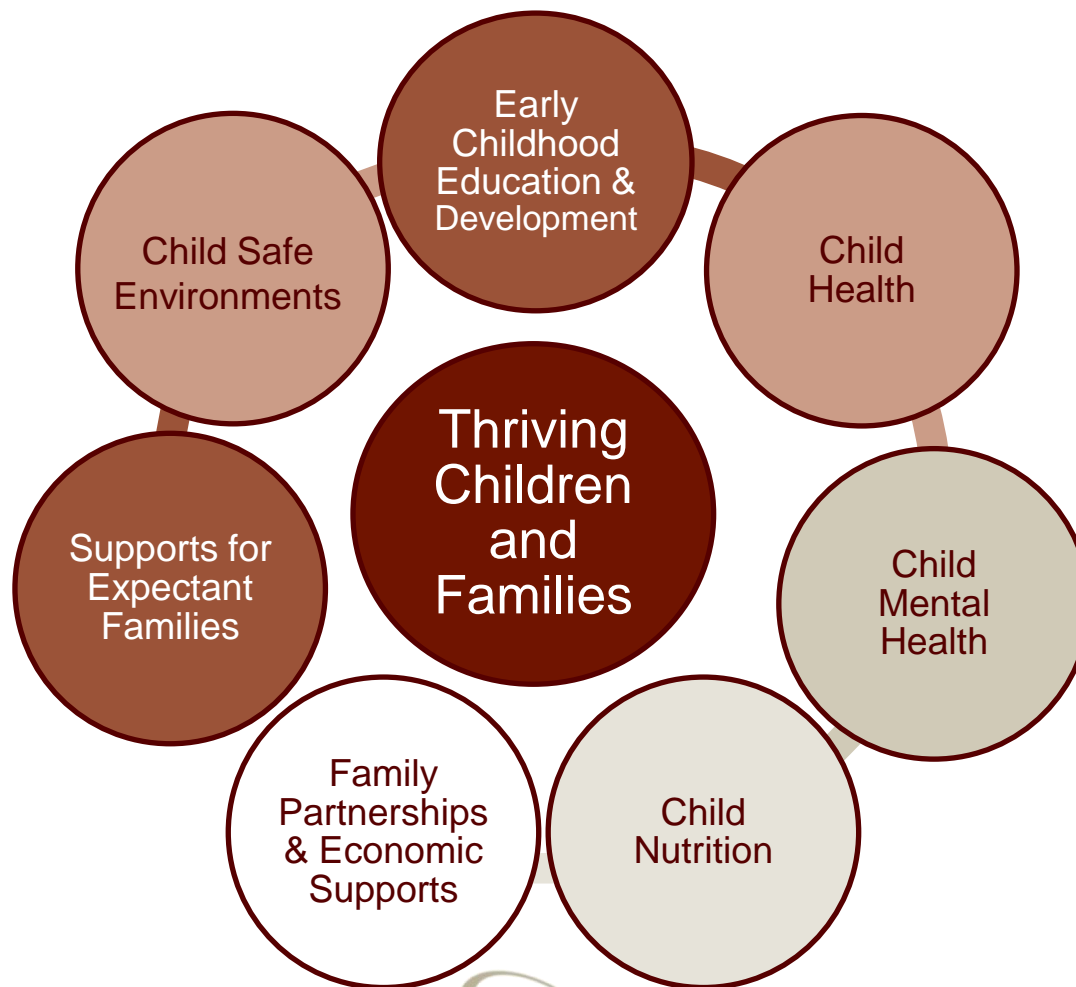
What Do We Mean By Comprehensive Services?

- Connection and access to **preventive health care services**, such as assistance in connecting to medical homes, preventive dental screenings, and tracking of vaccination and medical screening records;
- Support for **emotional, social and cognitive development**, including screening to identify developmental delays, mental health concerns, and other conditions that may warrant early intervention, mental health services, or educational interventions;
- **Family leadership and support**, including parent leadership development, parenting support, abuse prevention strategies, and connecting families to needed social services.

Why Financing and Funding Partnerships?

- Child Care and Early Education Funding is Insufficient
 - 42% of children eligible for HS preschool are served, and less than 4% of eligible infants and toddlers.
 - CCDBG serves 17% of eligible children and states do not pay rates high enough to support comprehensive services.
- Approaching services with a system building mindset
- Emphasis on effective and efficient use of funds.

Early Childhood System Components



Why Child Care Settings?

- Young children are in care for significant portions of time, in different settings, and from an early age.
 - Opportunity to reach young children early.
- Low-income children have less access to health insurance and health services.
- Relationships between caregivers and children and families may provide positive context for delivering preventive services.

Financing Guide Focuses on the Following Funding Streams

- Maternal and Child Health – Title V
- Healthy Tomorrows Partnership for Children
- Early Childhood Comprehensive Systems
- Home Visiting – MIECHV
- Child Abuse Prevention and Treatment Act/Community Based Child Abuse Prevention (CAPTA/CBCAP)
- Medicaid/SCHIP
- Elementary and Secondary Education Act (ESEA)-Title I
- McKinney-Vento
- Individuals with Disabilities Education Act (IDEA) Parts B and C
- Supplemental Nutrition Assistance Program (SNAP)
- SAMHSA (Project LAUNCH)
- Community Development Block Grant (CDBG)
- CCDBG and Head Start

What is a Partnership?

- Funding direct services in a child care setting
- Funding coordination of services that take place either inside or outside of the setting
- Building capacity of child care staff to provide services
- Funding materials and supplies to provide services

For Example: How Can Title V be Used?

States and communities can use Title V Maternal and Child Health Block Grant dollars to:

- Respond to needs identified by state health agencies (grantees);
- Improve access to quality health care for low-income families;
- Coordinate resources;
- Implement targeted population based initiatives; or
- Provide direct services.



Source: Sec. 504. [42 U.S.C. 704]

For example:

Child Care Nurse Consultants

- Both Arizona and Iowa use Maternal and Child Health funds to support child care nurse consultants.
- Both states also have used ECCS and state dollars
- Nurses provide technical assistance, help programs develop health-related policies, and in Iowa provide some preventive services.

Another example: Watch Me Grow RI

Goal: Increase the number of young children (infants and toddlers) receiving developmental and behavioral health screening

- Uses Maternal and Child Health, ECCS, CCDBG and Healthy Tomorrows
- Trains and supports child care providers to use developmental screening tools and share results with parents and health care providers
- Trains and supports pediatric primary care practices to use developmental screening tools and share results with parents.

RI Department of Health & RI Chapter of the American Academy of Pediatrics

Watch Me Grow RI (cont.)

Training in developmental screening and access to tools (ASQ-3, ECSCA, and ASQ-SE on request) helps child care providers:

- Understand each individual child's developmental progress
- Discuss children's development with parents
- Identify any developmental red flags and share information with parents and health care providers
- Screenings are conducted at 9, 18, 24, and 30 months of age
- 68 centers statewide are participating (33% of licensed centers serving infants/toddlers)

Funding Streams: Title I

- Can be used for ages birth through five, as well as older school-aged children.
- Can be used in community-based settings, like early childhood programs.
- Can be used to improve access to medical services, or diagnostic screenings.
- Can be used for other comprehensive services if they are otherwise not available.
- Partnerships are at the district level.

Funding Streams: IDEA Part B&C

- Serve children birth through 21. Part C is focused on infants and toddlers.
- Service delivery in “natural environment” including early childhood settings.
- Child Find requirements in every state give added incentive for partnering.
- Can be used for outreach to families, early childhood screening, and referral services.

Locally Administered Funding Streams

- Community Development Block Grant through Housing and Urban Development (HUD)
- Community Services Block Grant through Health and Human Services (HHS)
- Requires relationships at municipal level.
- Flexible use to address local needs of low-income families.
- May free up funds for other services.

Lessons and Considerations

- Build relationships with partners. Think about who administers what funds and what relationships already exist.
- Focus discussion on the GOAL of the funding stream and match with community needs, and with program. Seek flexibility in logistical details.
- Look for long-term sustainable funding, however use short-term funding to get started.
- Intermediaries (not direct service) are helpful for securing collaborative funding (public and private), and coordinate administrative requirements.

Lessons and Considerations

- Become engaged in community needs assessments with early childhood partners.
- Use research, data, and models from other states to build the case for partnerships.
- Share data across agencies, and include partners in planning.
- Consider multiple strategies, and the variety of child care settings.



Lessons And Considerations

- Consider the full range of funding streams—federal, state, and private
- Align systems as you incorporate funding streams, to make your financing initiative more sustainable.
- Pay attention to silos, and the targeted populations they serve as you explore creative financing solutions.

Resources

- *Putting it Together: A Guide to Financing Comprehensive Services in Child Care and Early Education*
 - Includes State Financing Worksheet (editable version available at www.clasp.org/childcare).
- More resources at www.clasp.org/childcare.



State Financing Worksheet

Appendix A: A Worksheet to Help States Get Started in Putting it Together

States and communities embarking on a partnership to expand access to comprehensive services within child care and early education settings can use this worksheet to begin mapping the need, available resources, and potential partnering strategies that will help them move forward.

What services do children need?

What type of service do you want to provide in your program, community, or state? (e.g. developmental screening, parent support, etc.)

What data do you have to document need in the state and in specific communities?

What funding streams are available to pay for these services?

Which funding streams include the needed services as part of their allowable uses?

Which funding streams can be used in partnership and/or within the child care and early education setting?

Are there opportunities presented by expansion of existing funding streams, changes in funding parameters, or the introduction of new funding opportunities in the state?

Which funding streams have other states and communities used to provide similar services in child care and early education settings?

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www.clasp.org/childcare

What's happening in Illinois

- Illinois has focused a lot on blending and braiding traditional ECE resources to support comprehensive services
 - PFA, Head Start, child care

Funding Direct Services

- Title I is used by Chicago Public Schools to fund a significant amount of preschool for at-risk children
 - Chicago Child-Parent Centers
- Only a few other districts use Title I for this purpose, but state does encourage it

Health & Mental Health Supports

- We have used CCDBG funds to provide comprehensive supports, including:
 - Nurse Consultants
 - Mental Health Consultants
 - *We know we don't have enough of these resources!*
- Some of the training that the Child Care Nurse Consultants receive is paid for through Title V

Developmental Screening

- Local Child & Family Connections have flexibility in how they conduct Child Find activities—we encourage them to partner with child care to find and screen children
- ECCS grant (and EDOPC grant) have historically supported training for child care to conduct developmental screening, including social-emotional screening
- Medicaid pays for developmental screening done by physicians

At the Local Level

- Community Development Block Grant
 - Aurora has used this to fund efforts to get more families enrolled in CCAP
- Requires relationships and often lengthy planning
- Look for federally sponsored sources of funds for capital, such as New Market Tax Credits, CCDBG

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